FORM M-103 (REV. 2004)

STATE OF HAWAII - DEPARTMENT OF TAXATION TRANSFER OF CIGARETTE TAX STAMPS

Caution: Use Form M-103 (Rev. 2004) for transfers occurring after June 30, 2004. For transfers occurring before July 1, 2004, use Form M-103 (Rev. 2003).

PART I In	I Information About the Licensee Transferring the Cigarette Tax Stamps				
Name					
Cigarette Tax S	Stamps Purchase App	roval Number (Assigned	on Form M-100A)		
Address					
	011		0	7: 0 !	
	City		State	Zip Code	
PART II In	formation About	the Licensee Recei	ving the Cigarette Tax St	amps	
Name					
Cigarette Tax S	Stamps Purchase App	roval Number (Assigned	on Form M-100A)		
Address					
			0	7.0.1	
	City		State	Zip Code	
PART III Tr	ansfer of Cigaret	te Tax Stamps			
				ly amount from line B, Part III, by \$1.40 and enter here	
Signatur	re of Licensee Transferring	the Cigarette Tax Stamps	Signature of Licensee Rec	eiving the Cigarette Tax Stamps	
	Print Name of Signatory		Print Name of Signatory		
	Title	Date	Title	Date	
FOR OFFICIAL	L USE ONLY:				
			☐Transfer of Cigarette	Гах Stamps Approved	
				Tax Stamps Disapproved	
			Signature_		
			-		
THIS SPACE FOR DATE RECEIVED STAMP			Date		

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Purpose of Form M-103

Licensees may not sell, exchange, or transfer unaffixed cigarette tax stamps without prior written approval by the Department of Taxation. Form M-103 is used to request approval for the transfer of the cigarette tax stamps.

GENERAL INSTRUCTIONS

Sections 245-21 and 245-22, Hawaii Revised Statutes (HRS), provide that licensees, as defined in section 245-1, HRS, shall pay the cigarette tax through the use of cigarette tax stamps and that licensees are required to place cigarette tax stamps on packs of cigarettes prior to distribution, as defined in section 245-1, HRS.

SPECIFIC INSTRUCTIONS

Part I

Enter information regarding the licensee transferring the cigarette tax stamps.

Part II

Enter information regarding the licensee receiving the cigarette tax stamps.

Part III

Enter information regarding the cigarette tax stamps being transferred.

Signatures

Form M-103 must be signed and dated by the licensee transferring the cigarette tax stamps and the licensee receiving the cigarette tax stamps.

Where To Get Information and Forms

Oahu District Office

830 Punchbowl Street P. O. Box 259

Honolulu, HI 96809-0259 Tel. No.: (808) 587-4242

Toll-Free: 1-800-222-3229 TDD/TTY No.: (808) 587-1418 TDD/TTY Toll-Free: 1-800-887-8974

Hawaii District Office

75 Aupuni Street, #101 P. O. Box 833 Hilo, HI 96721-0833

Toll-Free: 1-800-222-3229

Tax information and forms:

www.state.hi.us/tax

Where To Send Form M-103

Form M-103 may be mailed to the Department of Taxation, Taxpayer Services Branch, Licensing Section, P.O. Box 259, Honolulu, Hawaii, 96809-0259. After the form has been approved or disapproved, a copy will be returned to both the licensee transferring the cigarette tax stamps and the licensee receiving the cigarette tax stamps.

Maui District Office

54 South High Street, #208 P. O. Box 1169

Wailuku, HI 96793-6169

Toll-Free: 1-800-222-3229

Kauai District Office

3060 Eiwa St., #105 Lihue, HI 96766-1889 Toll-Free: 1-800-222-3229